



IPW

**PATENT**

Attorney Docket: 2541 FWC4 DIV CIP CON3  
(203-2716 FWC4 DIV CIP CON3)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANTS: Eric R. Cosman                      EXAMINER: Ruth S. Smith  
SERIAL NO.: 10/730,826                      ART UNIT: 3737  
FILED: December 8, 2003                      DATED: October 24, 2005  
FOR: **SURGICAL POSITIONING SYSTEM**

Mail Stop AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT TRANSMITTAL FORM**

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA	ADDIT. RATE FEE	OR	ADDIT. RATE FEE
TOTAL	5	MINUS	20	=	0	X 25 \$		X 50 \$ 0.00
INDEP.	1	MINUS	3	=	0	X 100 \$		X 200 \$ 0.00
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						X 180 \$		X 360 \$ 0.00
						TOTAL		OR TOTAL \$ 0.00
						ADDIT. FEE		\$ 0.00

No additional fee is required.

\* If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

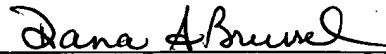
\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest No. Previously Paid For (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

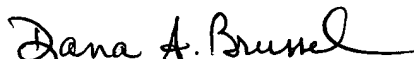
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Mail Stop Amendment, Commissioner for Patents, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450 on October 24, 2005.

Dated: October 24, 2005

  
Dana A. Brussel

- ☐ Please charge Deposit Account No. 21-0550 in the amount of \$ \_\_\_\_\_. Two (2) copies of this sheet are enclosed.
- ☐ A check in the amount of \$ \_\_\_\_\_ is enclosed.
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 21-0550. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



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Appl. No. 10/730,826  
Amdt. dated October 24, 2005  
Reply to Office Action mailed August 2, 2005

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P.O. Box 1450  
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**AMENDMENT**

Sir:

In response to the Office Action mailed August 2, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Amendments to the Drawings begin on page 4 of this paper and include eight attached replacement sheets.

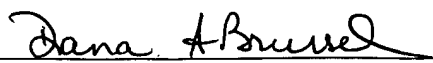
Remarks begin on page 5 of this paper.

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